

114TH CONGRESS
1ST SESSION

H. R. 2829

To repeal the Patient Protection and Affordable Care Act and health care-related provisions in the Health Care and Education Reconciliation Act of 2010, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JUNE 18, 2015

Mr. DIAZ-BALART (for himself and Ms. Ros-LEHTINEN) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, Education and the Workforce, Natural Resources, the Judiciary, House Administration, Rules, Appropriations, and the Budget, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To repeal the Patient Protection and Affordable Care Act and health care-related provisions in the Health Care and Education Reconciliation Act of 2010, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Free Market Healthcare Restoration and Coverage Act
6 of 2015”.

1 (b) TABLE OF CONTENTS.—The table of contents of
2 this Act is as follows:

See. 1. Short title; table of contents.
See. 2. Repealing the individual mandate.
See. 3. Repealing the employer mandate.
See. 4. Modifications to premium assistance credit.
See. 5. Freedom to maintain existing coverage.
See. 6. Essential health benefits.
See. 7. Repeal of PPACA and health care-related provisions in the Health Care
and Education Reconciliation Act of 2010.
See. 8. Budgetary effects.

3 **SEC. 2. REPEALING RETROACTIVELY THE INDIVIDUAL
4 MANDATE.**

5 Sections 1501 and 1502 and subsections (a), (b), (c),
6 and (d) of section 10106 of the Patient Protection and
7 Affordable Care Act (and the amendments made by such
8 sections and subsections) are repealed and the Internal
9 Revenue Code of 1986 shall be applied and administered
10 as if such provisions and amendments had never been en-
11 acted.

12 **SEC. 3. REPEALING RETROACTIVELY THE EMPLOYER MAN-
13 DATE.**

14 Sections 1513 and 1514 and subsections (e), (f), and
15 (g) of section 10106 of the Patient Protection and Afford-
16 able Care Act (and the amendments made by such sections
17 and subsections) are repealed and the Internal Revenue
18 Code of 1986 shall be applied and administered as if such
19 provisions and amendments had never been enacted.

1 **SEC. 4. MODIFICATIONS RETROSPECTIVELY TO PREMIUM**

2 **ASSISTANCE CREDIT.**

3 (a) EXTENSION OF CREDIT FOR CERTAIN INDIVID-
4 UALS NOT ENROLLED THROUGH STATE EXCHANGES.—
5 Subject to section 8(c)(2), paragraph (3) of section
6 36B(b) of the Internal Revenue Code of 1986 is amended
7 by adding at the end the following new subparagraph:

8 “(F) SPECIAL RULE FOR INDIVIDUALS EN-
9 ROLLED THROUGH A FEDERAL EXCHANGE.—In
10 the case of any applicable taxpayer who is not
11 eligible for the credit allowed under subsection
12 (a) (determined without regard to this subpara-
13 graph) solely as a result of a determination by
14 the Supreme Court of the United States in the
15 case of King v. Burwell (2015), paragraph
16 (2)(A) shall be applied to months beginning be-
17 fore September 2017, by substituting ‘enrolled
18 in through an Exchange established under the
19 Patient Protection and Affordable Care Act’ for
20 ‘enrolled in through an Exchange established by
21 the State under 1311 of the Patient Protection
22 and Affordable Care Act’.”.

23 (b) DENIAL OF CREDIT FOR INDIVIDUALS NOT PRE-
24 VIOUSLY ENROLLED.—Subject to section 8(c)(2), sub-
25 section (b) of section 36B of the Internal Revenue Code

1 of 1986 is amended by adding at the end the following
2 new paragraph:

3 “(4) LIMITATION FOR INDIVIDUALS NOT PRE-
4 VIOUSLY ENROLLED.—The premium assistance cred-
5 it amount shall be zero with respect to any qualified
6 health plan unless such plan covers an individual de-
7 scribed in paragraph (2)(A) who was enrolled in a
8 qualified health plan through an Exchange estab-
9 lished under the Patient Protection and Affordable
10 Care Act before the date of the enactment of this
11 paragraph.”.

12 (c) EFFECTIVE DATE.—The amendments made by
13 this section shall apply to months beginning after Decem-
14 ber 31, 2013.

15 **SEC. 5. FREEDOM TO MAINTAIN EXISTING COVERAGE.**

16 (a) IN GENERAL.—Subject to section 8(c)(2), part 2
17 of subtitle C of title I of the Patient Protection and Af-
18 fordable Care Act (42 U.S.C. 18011 et seq.) is amended
19 by striking section 1251 and inserting the following:

20 **“SEC. 1251. FREEDOM TO MAINTAIN EXISTING COVERAGE.**

21 “(a) NO CHANGES TO EXISTING COVERAGE.—

22 “(1) IN GENERAL.—Nothing in this Act (or an
23 amendment made by this Act) shall be construed to
24 require that an individual terminate coverage under
25 a group health plan or health insurance coverage in

1 which such individual was enrolled during any part
2 of the period beginning on the date of enactment of
3 this Act and ending on December 31, 2017.

4 “(2) CONTINUATION OF COVERAGE.—With re-
5 spect to a group health plan or health insurance cov-
6 erage in which an individual was enrolled during any
7 part of the period beginning on the date of enact-
8 ment of this Act and ending on December 31, 2017,
9 this subtitle and subtitle A (and the amendments
10 made by such subtitles) shall not apply to such plan
11 or coverage, regardless of whether the individual re-
12 news such coverage.

13 “(b) ALLOWANCE FOR FAMILY MEMBERS TO JOIN
14 CURRENT COVERAGE.—With respect to a group health
15 plan or health insurance coverage in which an individual
16 was enrolled during any part of the period beginning on
17 the date of enactment of this Act and ending on December
18 31, 2017, and which is renewed, family members of such
19 individual shall be permitted to enroll in such plan or cov-
20 erage if such enrollment is permitted under the terms of
21 the plan in effect as of such date of enrollment.

22 “(c) ALLOWANCE FOR NEW EMPLOYEES TO JOIN
23 CURRENT PLAN.—A group health plan that provides cov-
24 erage during any part of the period beginning on the date
25 of enactment of this Act and ending on December 31,

1 2017, may provide for the enrolling of new employees (and
2 their families) in such plan, and this subtitle and subtitle
3 A (and the amendments made by such subtitles) shall not
4 apply with respect to such plan and such new employees
5 (and their families).

6 “(d) EFFECT ON COLLECTIVE BARGAINING AGREEMENTS.—In the case of health insurance coverage maintained pursuant to one or more collective bargaining agreements between employee representatives and one or more employers that was ratified before December 31, 2017, the provisions of this subtitle and subtitle A (and the amendments made by such subtitles) shall not apply until the date on which the last of the collective bargaining agreements relating to the coverage terminates. Any coverage amendment made pursuant to a collective bargaining agreement relating to the coverage which amends the coverage solely to conform to any requirement added by this subtitle or subtitle A (or amendments) shall not be treated as a termination of such collective bargaining agreement.

21 “(e) DEFINITION.—In this title, the term ‘grandfathered health plan’ means any group health plan or health insurance coverage to which this section applies.”.

24 (b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect as if included in the Pa-

1 tient Protection and Affordable Care Act (Public Law
2 111–148).

3 **SEC. 6. ESSENTIAL HEALTH BENEFITS.**

4 (a) IN GENERAL.—Subject to section 8(c)(2), sub-
5 sections (a) and (b) of section 1302 of the Patient Protec-
6 tion and Affordable Care Act (42 U.S.C. 18022) are
7 amended to read as follows:

8 “(a) ESSENTIAL HEALTH BENEFITS PACKAGE.—In
9 this title, the term ‘essential health benefits package’
10 means, with respect to any health plan, coverage that pro-
11 vide for benefits and cost sharing as required in the States
12 in which such plan is offered.

13 “(b) ESSENTIAL HEALTH BENEFITS.—Essential
14 health benefits shall be defined to include those required
15 by the State in which a health plan is offered.”.

16 (b) EFFECTIVE DATE.—The amendment made by
17 subsection (a) shall take effect as if included in the Pa-
18 tient Protection and Affordable Care Act (Public Law
19 111–148).

20 **SEC. 7. REPEAL OF PPACA AND HEALTH CARE-RELATED
21 PROVISIONS IN THE HEALTH CARE AND EDU-
22 CATION RECONCILIATION ACT OF 2010.**

23 (a) PPACA.—Effective on May 31, 2017, the Patient
24 Protection and Affordable Care Act (Public Law 111–
25 148) is repealed, and the provisions of law amended or

1 repealed by such Act are restored or revived as if such
2 Act had not been enacted.

3 (b) HEALTH CARE-RELATED PROVISIONS IN THE
4 HEALTH CARE AND EDUCATION RECONCILIATION ACT OF
5 2010.—Effective on May 31, 2017, title I and subtitle B
6 of title II of the Health Care and Education Reconciliation
7 Act of 2010 (Public Law 111–152) are repealed, and the
8 provisions of law amended or repealed by such title or sub-
9 title, respectively, are restored or revived as if such title
10 and subtitle had not been enacted.

11 (c) TREATMENT OF OVERLAPPING PROVISIONS.—
12 Subsections (a) and (b)—

13 (1) shall not apply to provisions of law repealed
14 by sections 2 and 3 of this Act; and
15 (2) shall apply with respect to superseding the
16 amendments made by sections 4 through 6 of this
17 Act.

18 **SEC. 8. BUDGETARY EFFECTS.**

19 The budgetary effects of this Act shall not be entered
20 on either PAYGO scorecard maintained pursuant to sec-
21 tion 4(d) of the Statutory Pay-As-You-Go Act of 2010.

